PTO/SB/06 (08-03)

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Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN OR (Column 1) SMALL ENTITY (Column 2) SMALL ENTITY NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE BASIC FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = OR X \$ INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 = X \$ X \$_ OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR * If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN (Column 1) OR (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING PRESENT NUMBER RATE ADDI-RATE ADDI-AMENDMENT AFTER PREVIOUSLY EXTRA, TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total (37 CFR 1.16(c)) Minus OR Independent (37 CFR 1.16(b)) Minus = OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST m REMAINING PRESENT NUMBER RATE ADDI-RATE ADDI-AMENDMENT **AFTER** PREVIOUSLY **EXTRA** TIONAL TIONAL AMENDMENT PAID FOR FEE Total (37 CFR 1.16(c)) Minus OR Independent (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST REMAINING PRESENT NUMBER RATE ADDI-RATE ADDI-ENDMENT AFTER PREVIOUSLY **EXTRA** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total (37 CFR 1.16(c)) Minus OR Independent (37 CFR 1.16(b)) Minus X \$ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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	CLAIMS AS FILED -		0 0/3			1 ()	4 THE	129
(Column 1) (Column 2)		lumn 2)	SMALL	ENTITY	OR	SMALL	R THAN ENTITY	
FOR BASIC FEE	NUMBER FILED	NUMBE	R EXTRA	RATE	FEE]	RATE	FEE
(37 CFR 1.16(a)) TOTAL CLAIMS					\$	OR		\$
(37 CFR 1.16(c))	43 minus 20	. ·		X \$ =		OR	x \$ =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3	= .		X \$ =	1	OR	X \$ =	
MULTIPLE DEPENDENT	+ \$ =		1					
* If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL						OR	+\$=	
CLAIMS AS AMENDED – PART II						OR	TOTAL	
		TANTIL					071150	
	(Column 1) CLAIMS	(Column 2)	(Column 3)	SMALL I	ENTITY	OR	OTHER SMALL I	
EN A	REMAINING	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	,	RATE	ADDI- TIONAL
Total (37 CFR 1.16(c))	36 Minus	43,	=	X \$ =	/	OR	X \$ =	F <u>E</u> €
Z Independent (37 CFR 1.16(b))	Z Minus	" 4	-	X \$ =				/
FIRST PRESENTATION	ON OF MULTIPLE DEPENDENT	CLAIM (37 CFR	1.16(d))		-/-	OR	X \$=	/
7-3-03				+ \$ = TOTAL ADD'L FEE		or or	+\$= TOTAL ADD'L FEE	
7 5 00	Column 1)		(Column 3)					
		HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
Total (37 CFR 1.16(c))	A Minus "	43	/	X \$ =	FEE/			FEE
Z Independent (37 CFR 1.16(b))	a Minus	C/		x s =	1/2	OR	x \$=	T SIAPOINGER
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(4))							× s=_/_	
-	Anoi			+ \$ = TOTAL ADD'L FEE			TOTAL ADD'L FEE	
	21	Column 2) (Column 3)	4 MED				
RE	EMAINING I		RESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
Total *	Minus "	=	-/		-FEF	 -		FEE /
Total (37 CFR 1.16(b)) Independent (37 CFR 1.16(b))	57214	3 =	/	X \$= X \$ =	/		× \$=	/
TIMES FRESENTATION OF MULTIPLE DEPENDENT CLAIM 197 CER (Access)							<u> </u>	·
April 1966				+ \$ = TOTAL			otal	
* If the entry in column	1 is less than the entry in co	olumn 2, write "0"	in column 3.	ADD'L FEE		OR A	OD'L PÉE	
"If the "Highest Number The "Highest Number	er Previously Paid For" IN THE Previously Paid For" IN THE	TIS SPACE is les	ss than 20, ente s than 3, enter	er "20". "3",				- I

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